



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Chen & Huang

Application No. 10/753,078

Filed: January 8, 2004

Atty Dkt No. PP16331.004/012441.00050

For: **IMPROVED METHOD OF PURIFYING TFPI AND TFPI ANALOGS**

CORRECTED SUBMISSION OF SUPPLEMENTAL APPLICATION DATA SHEET

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Although the Application Data Sheet filed on April 19, 2004, was correct, the accompanying Submission of Supplemental Application Data Sheet form identified the incorrect application. Accordingly, this corrected form is submitted herewith.


Applicants submit the accompanying Supplemental Application Data Sheet, which identifies a second assignee.

If any fees are due, please charge our Deposit Account No. 19-0733.

Respectfully submitted,

Dated: April 23, 2004

By:



Lisa M. Hemmendinger
Registration No. 42,653

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Application Data Sheet

Application Information

Application number::	<u>10/753,078</u>
Filing Date::	<u>01/08/04</u>
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	Improved Method of Purifying TFPI and TFPI Analog
Attorney Docket Number::	12441.00050/16331.004
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	18
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	NO



Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	David
Middle Name::	H.
Family Name::	REIFSNYDER
Name Suffix::	
City of Residence::	El Cerrito
State or Province of Residence::	California
Country of Residence::	United States of America
Street of mailing address::	
City of mailing address::	El Cerrito
State or Province of mailing address::	California
Country of mailing address::	United States of America
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	Duane
Middle Name::	
Family Name::	INLOW
Name Suffix::	
City of Residence::	Alamo
State or Province of Residence::	California
Country of Residence::	United States of America
Street of mailing address::	
City of mailing address::	Alamo

State or Province of mailing address:: California
Country of mailing address:: United States of America
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Glenn

Middle Name::
Family Name:: DORIN
Name Suffix::

City of Residence:: San Rafael
State or Province of Residence:: California
Country of Residence:: United States of America
Street of mailing address::

City of mailing address:: San Rafael
State or Province of mailing address:: California
Country of mailing address:: United States of America
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Patricio
Middle Name:: T.
Family Name:: RIQUELME
Name Suffix::
City of Residence:: Walnut Creek
State or Province of Residence:: California
Country of Residence:: United States of America

Street of mailing address::

City of mailing address:: Walnut Creek

State or Province of mailing address:: California

Country of mailing address:: United States of America

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Cynthia

Middle Name::

Family Name:: COWGILL

Name Suffix::

City of Residence:: Berkeley

State or Province of Residence:: California

Country of Residence:: United States of America

Street of mailing address::

City of mailing address:: Berkeley

State or Province of mailing address:: California

Country of mailing address:: United States of America

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Doug

Middle Name:: G.

Family Name:: BOLESCH

Name Suffix::

City of Residence:: Berkeley

State or Province of Residence:: California
Country of Residence:: United States of America
Street of mailing address::
City of mailing address:: Berkeley
State or Province of mailing address:: California
Country of mailing address:: United States of America
Postal or Zip Code of mailing address::
Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Mark
Middle Name:: E.
Family Name:: GUSTAFSON
Name Suffix::
City of Residence:: St. Charles
State or Province of Residence:: Missouri
Country of Residence:: United States of America
Street of mailing address::
City of mailing address:: St. Charles
State or Province of mailing address:: Missouri
Country of mailing address:: United States of America
Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 27476

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/512,199	October 20, 2003
This Application	Non-Provisional of	60/509,277	October 8, 2003
This Application	Non-Provisional of	60/494,546	August 13, 2003

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Chiron Corporation
Street of mailing address:: 4560 Horton Street
City of mailing address:: Emeryville
State or Province of mailing address:: California
Country of mailing address:: United States of America
Postal or Zip Code of mailing address:: 94608-2916

Assignee name:: Pharmacia & Upjohn Company
Street of mailing address:: 7000 Portage Road
City of mailing address:: Kalamazoo
State or Province of mailing address:: MI
Country of mailing address::
Postal or Zip Code of mailing address:: 49001